

One & Two Family Rental License Application

All Fields Must Be Completed

PREMISES TO BE INSPECTED

Address _____

Single Family \$220 _____ Duplex \$240 _____ Owner occupied: <Yes <No
(Make checks payable to City of Duluth) **Note: Expired Licenses must submit an additional \$100.00 fee for reinstatement of your license effective 1/1/2009.**

Owner(s)

Name _____

Address _____

Phone _____
(Home) (Work) (Cell) e-mail

* Local Manager/ Representative _____

Address _____

Phone _____
(Home) (Work) (Cell) e-mail

* Must be completed if owner does not live within 25 miles of Duluth

I hereby acknowledge that I have completed this application and state that the information contained therein is correct.

Signature _____ Manager/ Owner Date: _____

NOTICE: The information provided in this application is a public record.

☐ Property located in an R-1 zoning district:
Number of Bedrooms _____
Number of Tenants _____

* You will need a parking diagram showing your property lines, buildings and off-street parking.

☐ Property located in an R-2, or R-3 zoning district:
of Bedrooms ____
of Tenants ____

☐ Property not located in an R-1, R-2 or R-3 zoning district

Specify: _____

OFFICE USE ONLY:

Date Received: _____

Time Received: _____

Amount: _____

Received By: _____

Zoning Verification: _____

Complies w/ 300' rule:

<Yes <No

File # _____

Date Application Approved/ Rejected

***** We are unable to issue a Temporary Rental License *****

without a complete application and fee.

Mailing Address: Building Safety, 411 W 1st St, Duluth, MN 55802

A temporary license will not be issued until staff has verified that application is complete and accurate.